

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Kevin Michael Ruppelt et al. :  
Serial No.: 09/480,589 : Art Unit: 3624  
Filed: January 10, 2000 : Examiner: Loftis, Johnna Ronee  
For: Method, System and Program Product :  
for On-Line Service Call Scheduling :  
:

**Mail Stop AF**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

**TRANSMITTAL**

1. Transmitted herewith is:  
Transmittal (3 pages)  
Request for Reconsideration After Final Rejection (19 pages)

**STATUS**

2. Applicant  
 claims small entity status.  
 is other than a small entity.

**EXTENSION OF TERM**

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a)  Applicant petitions for an extension of time under 37 C.F.R. 1.136  
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
<input type="checkbox"/> first month	\$ 130.00	\$ 65.00
<input type="checkbox"/> second month	\$ 490.00	\$ 245.00
<input type="checkbox"/> third month	\$ 1,110.00	\$ 555.00
<input type="checkbox"/> fourth month	\$1,730.00	\$ 865.00

fifth month \$2,350.00 \$1,175.00

Fee: \$

If an additional extension of time is required, please consider this a petition therefor.

*(Check and complete the next item, if applicable)*

An extension of \_\_\_\_\_ months has already been secured. The fee paid therefor \$\_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ \_\_\_\_\_

OR

(b)  Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

## **FEE FOR CLAIMS**

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)		SMALL ENTITY		OTHER THAN SMALL ENTITY	
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR		PRESENT EXTRA		ADDITIONAL RATE FEE		ADDITIONAL RATE FEE	
TOTAL INDEP.	MINUS			=		x \$26.00 = \$		x \$52.00 = \$	
	MINUS			=		x \$110.00 = \$		x \$220.00 = \$	
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						+ \$195.00 = \$		+ \$390.00 = \$	
						TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$	

(a)  No additional fee for Claims is required

OR

(b)  Total additional fee for claims required \$ \_\_\_\_\_

## **FEES PAYMENT**

5. Attached is a check in the sum of \$\_\_\_\_\_

Charge Deposit Account No. 01-2384 the sum of \$.

## **FEES DEFICIENCY**

6.  If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

**AND/OR**

If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7.  Other:

*Eric T. Krischke*

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Eric T. Krischke  
Registration No. 42,769  
ARMSTRONG TEASDALE LLP  
One Metropolitan Square, Suite 2600  
St. Louis, MO 63102  
314-621-5070